

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69057	4/10/00
O.I.P.E. CLASSIFIER			4-17-00
FORMALITY REVIEW	NND	10823	6-1-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	9 19 63 04/04
2	2 = = ✓
3	3 = = ✓
4	4 = = ✓
5	5 = = ✓
6	6 = = ✓
7	7 = = ✓
8	8 = = ✓
9	9 = = ✓
10	10 = = ✓
11	11 = = ✓
12	12 = = ✓
13	13 = = ✓
14	14 = = ✓
15	15 = = ✓
16	16 = = ✓
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42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	Original
51	9 04
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	✓
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61	✓
62	✓
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions
staple additional sheet here